

QUALITY IMPROVEMENT  
AND ASSURANCE (QIA) ACTIVITY  
SUMMARY REPORT

Staffing Level Appropriateness Review <sup>1</sup>					
	Example	1 <sup>st</sup> Qtr.	2 <sup>nd</sup> Qtr.	3 <sup>rd</sup> Qtr.	4 <sup>th</sup> Qtr.
(a) Date review was completed	April 4, 2010				
(b) Reviewer(s) name & position	J. Doe, Resident Care Coordinator				
(c) Date & shift targeted for staff review: # Resident census that day; # PC staff	Mar. 30, 2010, 3-11pm 20 SCR Residents 3 SCR aides on duty				
(d) Total # hrs. of all personal care duties that are <u>assigned</u> to aids during that shift on that day	½ hr. personal care (PC) budgeted to ea. Resident, or 10 hrs. of PC assigned for bed-time hygiene				
(e) # of staff hours expended on unscheduled Resident care (i.e., # hrs. of PC delivered beyond the PC tasks that were scheduled for that shift) <sup>2</sup>	4 hours expended on sundry, <u>unscheduled personal care duties</u> , of which some, all or none will be billed separately				
(f) Total # hrs. staff time expended on PC that shift [(d) + (e) = (f)]	14 total hours of PC rendered on SCR, 3/30/10, 3-11pm				
(g) Total <b>PC staff hrs. scheduled</b> for the shift	SCR staff 3pm-11pm= 3 FTE 3 FTE x 8 hrs =24 hrs				
(h) Proportion of the shift's total <b>PC staff time</b> given to Resident care [(g)/(f) = %]	60% of the available staff hrs was given to PC  24 staff hrs. /14 hrs. used				
If (f) exceeds (g), please explain on additional sheet	See reverse side				

<sup>1</sup> In accordance with 651 CMR 12.06(6), the Residence must implement a process for determining its staffing levels and review, at least quarterly, the appropriateness of its staffing levels.

<sup>2</sup> Additional hours are unscheduled personal care, only, such as unscheduled incontinence care, and related bathing; a prolonged SAMM for a difficult administration etc.